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PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	P05380US0
Filing Date	
First Named Inventor	Braham Shroot
Group Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

☒ Practitioners at Customer Number

22885

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OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Braham Shroot

Signature

Braham Shroot

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 6 forms are submitted.

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SIGNATURE of Applicant or Assignee of Record

Name Lawton A. Seal

Signature

Date

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SIGNATURE of Applicant or Assignee of Record

Name James R. Hunt

Signature

Date

11/21/02

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SIGNATURE of Applicant or Assignee of Record

Name	Jonthan Sterling
Signature	
Date	

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SIGNATURE of Applicant or Assignee of Record

Name

Kathy Bolsen

Signature

Kathy Bolsen

Date

Jan 21, 02

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Attorney Docket Number	

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
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SIGNATURE of Applicant or Assignee of Record

Name

Penny L. Sitka

Signature

Date

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☒ *Total of 6 forms are submitted.

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	P05380US0
	First Named Inventor	Braham Shroot
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Art Unit	
	Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Low Temperature Disinfectant/Sterilant For Medical Devices and Topical Applications

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☒ Customer Number or Bar Code Label **22885** OR ☐ Correspondence address below

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State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : ☒ A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any]) BrahamFamily Name
or Surname ShrootInventor's
Signature *Brahm Shroot*

Date

Residence: City San Antonio

State TX

Country USA

Citizenship USA

Mailing Address 680 Basse Rd., Apt 300

City San Antonio

State TX

ZIP 78209

Country USA

NAME OF SECOND INVENTOR: ☒ A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any]) Lawton A.Family Name
or Surname SealInventor's
Signature *Lawton A. Seal*Date *2/2/02*

Residence: City Schertz

State TX

Country USA

Citizenship USA

Mailing Address 120 Newrock Creek

City Schertz

State TX

ZIP 78154

Country USA

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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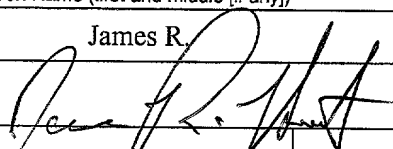
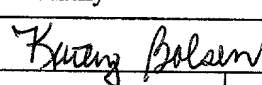
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>4</u>
--------------------	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
James R.		Hunt	
Inventor's Signature 		Date <u>1/21/02</u>	
Residence: City	San Antonio	State	TX
		Country	USA
Citizenship		USA	
Mailing Address 15410 El Park Drive			
Mailing Address			
City	San Antonio	State	TX
		ZIP	78247
		Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jonathan		Sterling	
Inventor's Signature		Date	
Residence: City	San Antonio	State	TX
		Country	USA
Citizenship		USA	
Mailing Address 5622 Evers Rd.			
Mailing Address No. 2807			
City	San Antonio	State	TX
		ZIP	78238
		Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kathy		Bolsen	
Inventor's Signature 		Date <u>Jan 21, 02</u>	
Residence: City	San Antonio	State	TX
		Country	USA
Citizenship		USA	
Mailing Address 13999 Old Blanco Road			
Mailing Address			
City	San Antonio	State	TX
		ZIP	78216
		Country	USA

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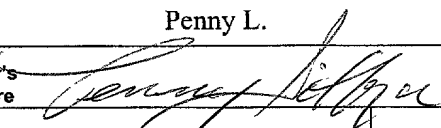
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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 4 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Penny L.		Sitka	
Inventor's Signature 		Date <u>Jan 21, 2002</u>	
Residence: City	San Antonio	State	TX
		Country	USA
Mailing Address			
5622 Evers #2801			
Mailing Address			
City	San Antonio	State	TX
		ZIP	78238
		Country	USA
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